Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date:	03-05-2010	Address:	5392 South Detroiter
Case #:	<u>96-04802</u>		North Judson, IN
County:	<u>Starke</u>		
Type of Laboratory Seizure (check one)		Seizure Location (check all that apply)	
☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Residence Outbuilding Vehicle	☐ Hotel/Motel ☐ Open – No Structure ☑ Other: trash can
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s):			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents:			
Water Reactive Metal (Lithium):			
Anhydrous Ammonia:			
Hydrochloric Acid Gas Generator(s): removed from trash			
Corrosive Acid:			
Corrosive Base:			
Other (it	tem and location):		
Yes No	er age 18 discovered (check one) (number present) port to Child Protective Services	☐ Ephedrine ☐ Retail/Me	e Information e/Pseudoephedrine Tracking Log erchant Tip rth Judson PD
This report is to be faxed to the following agencies that serve the location:			
Fire Departi	ment: North Judson VFD	Fax: <u>574-896-2712</u>	
Health Department: Starke County		Fax: <u>574-7′</u> Fax:	·
Child Proteo	ction Service:		
For further information regarding this methamphetamine laboratory, contact Investigating Officer: Scott Gilbert Phone 574-546-4900			

This form is to be included with the case file, and a copy sent to the Clandestine Laboratory Team Leader for retention.

This form is to be faxed to the Fire Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.